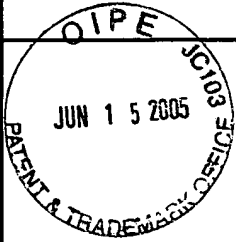


**CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)**Applicant(s): **Hole et al.**

Docket No.

**24647-81901 (0-03-192)**Application No.  
**10/658,665**Filing Date  
**September 10, 2003**

Examiner


Customer No.  
**34492**Group Art Unit  
**3763**Invention: **USE OF NITRIC OXIDE AND A DEVICE IN THE THERAPEUTIC MANAGEMENT OF PATHOGENS  
IN MAMMALS**I hereby certify that this **Change of Correspondence Address***(Identify type of correspondence)*

is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on  
**June 13, 2005**

*(Date)***Melody K. Gutierrez***(Typed or Printed Name of Person Mailing Correspondence)*

A handwritten signature in black ink, appearing to read "Melody K. Gutierrez".

*(Signature of Person Mailing Correspondence)***Note: Each paper must have its own certificate of mailing.**

 <b>CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/658,665
	Filing Date	September 10, 2003
	First Named Inventor	HOLE et al.
	Art Unit	3763
	Examiner Name	
	Attorney Docket Number	24647-81901 (0-03-192)

Please change the Correspondence Address for the above-identified patent to:

☒ The address associated with Customer Number: 34492

Please direct all future telephone calls to: Carissa A. Tener at (213) 896-6621.

☐ Firm or Individual name

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

This form cannot be used to change the date associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

This form will not affect any "fee address" provided for the above-identified patent. To change a "fee address" use the "fee Address Indication Form" (PTO/SB/47).

I am the:

- ☐ Applicant.
- ☐ Assignment of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
- ☒ Attorney or agent of record. Registration Number 52,278

Signature Carissa Tener

Typed or  
Printed Name Carissa A. Tener

Date 6/10/05 Telephone: 213-896-6621

NOTE: Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.